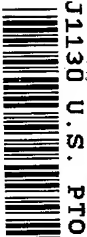


10/31/01



1130 U.S. PTO

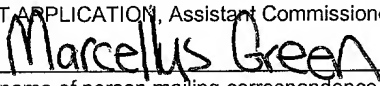
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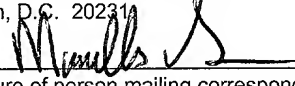
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I hereby certify under 37 C.F.R. § 1.10 that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" with sufficient postage on the date indicated above and is addressed to: BOX PATENT APPLICATION, Assistant Commissioner for Patents, Washington, D.C. 20231


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UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)

Attorney Docket Number

00786/388002

Applicant

Jack W. Szostak et al.

Title

STREPTAVIDIN-BINDING PEPTIDES AND USES THEREOF

PRIORITY INFORMATION:

This application claims the benefit of the filing date of United States provisional patent application 60/244,541, filed October 31, 2000.

SMALL ENTITY STATUS:

☒ Applicant claims small entity status under 37 C.F.R. § 1.27.

APPLICATION ELEMENTS:

Cover sheet

1 page

Specification

40 pages

Claims

4 pages

Abstract

1 page

Drawing

23 sheets

Combined Declaration and POA, which is:

3 pages

☒ Unsigned;

☐ Newly signed for this application;

☐ A copy from prior application [**SERIAL NUMBER**] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.

Sequence Statement

[**] pages

Sequence Listing on Paper

[**] pages

Sequence Listing on Diskette

[**] disk

Small Entity Statement, which is:

[**] pages

☐ A copy from prior application [**SERIAL NUMBER**] and such small entity status is still proper and desired.

Preliminary Amendment	[**] pages
IDS	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] references
Recordation Form Cover Sheet and Assignment	[**] pages
English Translation	[**] pages
Certified Copy of Priority Document	[**] pages
Return Receipt Postcard	1

FILING FEES:

Basic Filing Fee:\$370	\$370.00
Excess Claims Fee: 35 - 20 x \$9	\$135.00
Excess Independent Claims Fee: 11 - 3 x \$42	\$336.00
Multiple Dependent Claims Fee: \$140	\$140.00
Total Fees:	\$981.00

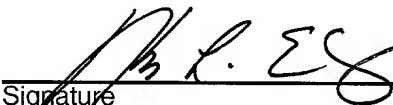
- ☒ Enclosed is a check for \$981.00 to cover the total fees.
☐ Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees.
☐ The filing fee is not being paid at this time.
☒ Please apply any other charges, or any credits, to Deposit Account No. 03-2095.

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CUSTOMER NO: 21559


 Signature

31 October 2001
 Date

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